PUBLIC HEALTH AND MEDICAL (EMERGENCY FUNCTION 08) SITUATION REPORT

EBOLA VIRUS DISEASE, 2014

DATE OF REPORT: OCTOBER 16, 2014
OPERATIONAL PERIOD: OCTOBER 13 - OCTOBER 17, 2014
CALIFORNIA DEPARTMENT OF PUBLIC HEALTH
EMERGENCY MEDICAL SERVICES AUTHORITY

EXECUTIVE SUMMARY

There are currently no suspected or confirmed cases of the Ebola Virus Disease (EVD) in California. The risk of EVD to the public is very low. Healthcare providers may be at a higher risk for EVD infection.

The outbreak of EVD in the West African nations of Guinea, Sierra Leone, and Liberia continues to expand but does not pose a significant risk to the United States. As of October 12, the World Health Organization has reported a cumulative total of 8997 suspect, probable, and confirmed cases and 4493 deaths.

The CDC, California Department of Public Health (CDPH), and Emergency Medical Services Authority (EMSA) continue to prepare for the management of potential EVD cases in California.

CDPH continues to work with the healthcare community and local health jurisdictions to identify potential suspect cases and avoid spread of the disease. New guidelines and updated guidelines released by CDC are posted on the CDPH website available at: (http://cdph.ca.gov/programs/cder/Pages/Ebola.aspx). CDPH and local health jurisdictions are monitoring the situation closely and are taking steps to keep the public safe. EMSA has developed guidelines for Emergency Medical Services (EMS) personnel based on the recommendations of CDC and the California Department of Industrial Relations (DIR). The guidelines have been distributed to Local Emergency Medical Services Agency (LEMSA) Administrators, LEMSA Medical Directors and the Regional Disaster Medical Health Coordination (RDMHC) Program; these guidelines will be updated as the situation evolves. The document is posted on EMSA's website at http://www.emsa.ca.gov/ebola_control.

CDPH continues to recommend that healthcare providers implement the protocols established by the CDC about how to detect and isolate patients who may have EVD and about how healthcare workers exposed to EVD can be protected. The CDC advises that healthcare providers in the U.S. should consider an EVD infection in the

differential diagnosis of febrile illness, with compatible symptoms, in any person with recent (within 21 days) travel history in the affected West African nations. The CDC advises people returning from the affected areas who may be at high risk for EVD should be promptly isolated and their blood sent to CDC for testing.

DUTY OFFICERS ON CALL

Table 1. Duty Officers On Call				
Agency/Program	Duty Officer Information			
CDPH Duty Officer	Name:	Jerry Fuhrman		
	Contact Information:	916-328-3605		
EPO Duty Officer	Name:	John Wogec		
	Contact Information:	916-328-9025		
EMSA Duty Officer	Name:	Markell Pierce		
	Contact Information:	916-423-0911		

CDPH/DHCS/EMSA CURRENT OPERATIONS

The CDPH internal workgroup to address all public health aspects of the EVD response meets bi-weekly.

<u>Center for Infectious Diseases (CID) Division of Communicable Disease Control (DCDC)</u>

Epidemiology

- Significant Issues: See documents listed below.
- Critical Issues: Expanding the staffing for the Richmond Campus Coordination Center (RCCC) to meet the surge demands.
- Program Impacts:
 - Continue to provide technical consultation for Ebola to local health departments
 - Monitoring reported Ebola cases and clinical cases
 - Expanding structure to include veterinary issues, animals and Ebola.
 - Implementing a team to develop contract tracing and monitoring of traveler guidelines.

Surveillance

 All suspect cases must be reported to the local health jurisdiction. The local health jurisdictions will work with the DCDC clinical consultants to determine both the clinical criteria and risk factors for persons suspected of having EVD.

Laboratory

- Significant Issues:
 - The CDC is evaluating whether additional Laboratory Resource Network labs will be selected to perform the Ebola Zaire (EZ1) rRT-PCR assay. Currently the Los Angeles Public Health Lab (LA PHL) is one of 13 US labs approved for testing Ebola samples.
 - If local laboratories (other than Los Angeles) are contacted regarding suspect clinical samples for EVD testing, they should contact CDPH.
 - CDPH Viral and Rickettsial Disease Laboratory (VRDL) is performing a risk and resource assessment to determine feasibility and readiness to test patient samples. Ebola rRT-PCR kit will be received from CDC if this is to occur, and VRDL will be required to test and pass a validation panel prior to testing any suspect specimens.
- Critical Issues:
 - Identification of usable Biosafety Level 3 containment laboratory to handle and inactivate clinical samples.
- o Program Impacts:
 - If testing is implemented at VRDL:
 - Likely have significant impact on personal protective equipment (PPE) supplies at VRDL. Other supplies needed for purchase will likely be minimal since kits are provided by CDC.

Infection Control

- CDPH is collaborating with DIR/CalOSHA to develop personal protective measures/guidelines and decontamination procedures.
- o Critical Issues: None
- Program Impacts: No change

Information Officer Activities

- Key Messages
 - Ebola is NOT an airborne transmitted virus. Isolation and personal protective equipment are focused on CONTACT ISOLATION as recommended by the CDC.
 - CDPH and EMSA have a plan and processes for response to Ebola.
 - California's hospitals have the capability and capacity to manage Ebola patients.

- DCDC is receiving an increased number of public and healthcare partnerrelated questions via email and will be responding as time allows. The Richmond Campus Coordination Center (RCCC) is tracking the number of inquiries and will report numbers of inquiries on October 17, 2014.
 - DCDC has requested the MHCC for possible activation of a Joint Information Center (JIC) to manage the number of inquiries.

RCCC Activities

The RCCC remains activated at Level 1 with minimal staffing. Hours of operation are 8:00 am to 5:00 pm, Monday through Friday. The DCDC and CDPH Duty Officers provide 24/7 after-hours coverage.

- Significant Issues and Activities:
 - Participated on other conference calls led by CDC and the Association of State and Territorial Health Officers (ASTHO).
- Critical Issues: None
- Resource Requests/Needs:
 - World Courier account for Ebola shipping
 - Cache of cell phones for responders (received 2 from EPO, mobilized one from CDER to date)

Medical Countermeasures

There are no updates at this time.

Community Mitigation

There are no updates at this time.

Other DCDC Actions

Documents in Development, In Process of Update, or Released by CDPH

- CD Brief: Update on Ebola
- Medical Flyer for hospital E.D.s, and Clinics (English and Spanish Versions)
- Legislative Inquiry to CDPH regarding the EVD
- Response to Media Inquiries

Environmental Management Branch (EMB)

- CDPH EMB Medical Waste Management Program (MWMP) is developing an Ebola medical waste handling template consistent with CDC guidelines and in collaboration with the California Hospital Association that can be utilized by all hospitals. The draft document is currently with management for approval.
- The DOT has indicated that states may apply for exemptions to the Category A: Infectious Substance packaging requirements.

Emergency Preparedness Office (EPO)

- CDPH and EMSA continue activation of the Medical and Health Coordination Center (MHCC) on October 8 to support activities of the RCCC and departmental programs, and enhance communication between emergency response and preparedness partners in California.
- MHCC and EPO management regularly participate in teleconferences regarding EVD with Federal, State, and local partners, assist in development of guidance documents, and coordinate CDPH program actions.
- MHCC maintains an incident on the Cal EOC website.
- CHPH has contracts in place with World Courier to accommodate transport of EVD samples.

Licensing and Certification Branch

• L&C issued AFL 14-22, *Ebola Virus and Disease Information and Preparedness*. Please note this document is aimed at our primary care clinics.

CAHAN ALERTS

None

EMSA CURRENT OPERATIONS

 EMSA has issued guidelines for EMS personnel based upon CDC recommendations through the RDMHC and Medical and Health Coordination (MHOAC) Programs. EMSA is prepared to continue coordination with EPO, RDMHC, and MHOAC Programs.

OPERATIONAL AREA CURRENT IMPACTS/ACTIONS

• Current impacts/actions for Operational Areas are not included in this situation report as local situation reports have not been requested or provided at this time.

STATE/REGION OVERVIEW

Table 2. State/Region Overview				
Region/State	Proclamation/Declaration	Activation		
MHCC	None	Level I		

PUBLIC INFORMATION

10/15/2014

Nadine Abott, Reporting San Diego

Susan Abram, Los Angeles Daily News

Ben Adler, Capital Public Radio

Susan Bar, Kearn Valley News

Michael Bott, KXTV-TV (Sacramento)

Andres Brender, KSTS-TV (San Jose, Telemundo)

Eryn Brown, Los Angeles Times

Michael Cabanabua, San Francisco Chronicle

Gary Cohen, 24/7 News Service

Gerri Constant, KCAL-TV (Los Angeles)

Mary-Liz Cortese, KGO Radio (San Francisco)

Cynthia Craft, Sacramento Bee

April Dembosky, KQED-FM (San Francisco)

Laura Dudnick, San Francisco Examiner

Ellen Ellery, KTVU-TV (San Francisco)

Judy Farah, KFBK-AM

Marianne Favro, KNTV-TV (San Jose)

Carol Ferguson, KBAK-TV (Bakersfield)

Bianca Graulau, KXTV-TV (Sacramento)

Taylor Haney, Annenberg News

Dan Kerman, KRON-TV (San Francisco)

Lisa Krieger, San Jose Mercury News

Camillia Lanham, Santa Maria Sun

Elizabeth Larson, Lake County News

Portia Li, World Journal

Judy Lin, Associated Press

Joe Michaels, KFBK-AM (Sacramento)

Monte Morin, Los Angeles Times

Mike Murray, KFBK-FM (Sacramento)

My Nguyen, Palo Alto Weekly

Lata Pandya, PCET-TV (Southern California)

Claudia Peschiutta, KNX-AM

Rebecca Plevin, KPCC-FM (Pasadena)

Allen Prock, KGET-TV (Bakersfield)

Simon Quiu, The China Press

Dennis Rademacher, JOCX-DTV (Japan)

Lonni Rivera, CTNS-TV (Sacramento)

Kathy Robertson, Sacramento Business Journal

Diane Ronnau, CBS News

Jennifer Seelig, KCBS Radio

Sharokina Shams, KCRA-TV (Sacramento)

Ron Shinkman, Payers & Providers

David Singer, KNX-AM (Los Angeles)

Paul Sisson, San Diego Union Tribune

Jeff Stalk, City News Service Los Angeles

Carolyn Tyler, KGO-TV (San Francisco)

Allison Vekshin, Bloomberg News

Paul Westbrook, KCRA-TV (Sacramento)

Michael Clark, KGO-TV (San Francisco)

Jesus Gonzalez, KUVS-TV (Sacramento/Univision)

Ralph Cervantes, KOVR-TV (Sacramento)

Marin Austin, KTXL-TV (Sacramento)

Ken Cavalli, CTNS-TV (Sacramento)

Bianca Graulau, KXTV-TV (Sacramento)

Kelly Ryan, KOVR-TV (Sacramento)

James Taylor, KOVR-TV (Sacramento)

10/14/2014

David Bienick, KCRA-TV (Sacramento)
Mallory Russell, Capitol Television News Service (Sacramento)
Lisa Krieger, San Jose Mercury News

10/13/2014

Diane Ronnau, CBS Evening News and Derek Shore, KOVR-TV

Guidance Documents

CDC documents listed below are available on the CDC website (CDC.gov). CDPH documents listed below are available on the CDPH website (CDPH.ca.gov). The American Society of Microbiology (ASM) document can be found on the ASM website (www.asm.org).

Table 3. Guidance Documents				
Title	Source	Document Date	Distributed	
Health Alert on Ebola HAN 00363	CDC	7/28/2014	8/1/2014	
Infection Prevention and Control Recommendations for HCF	CDC	8/1/2014	8/1/2014, 8/8/2014	
Case Definition (Person Under Investigation [PUI])	CDC	8/7/2014	8/8/2014	
Interim Guidance for Specimen Collection, Transport, Testing and Submission for Patients with Suspected Infection with Ebola Virus Disease	CDC	8/6/2014	8/8/2014 8/15/2014	
Case Definition (Person Under Investigation [PUI])	CDC	8/7/2014	8/15/2014	
Guidance for Specimen Transport	DCDC	8/2014	8/15/2014 8/22/2014 8/29/2014	
Interim Guidance for Specimen Collection, Transport, Testing and Submission for Patients with Suspected Infection with Ebola Virus Disease	CDC	8/22/2014	8/22/2014	
Updated poster depicting the sequence for putting on and removing personal protective equipment (PPE)	CDC	8/18/2014	CD Brief 8/22/2014	
Viral Hemorrhagic Fever Case Report Form	CDPH	8/22/2014	8/22/2014 8/29/2014	
Case Definition (Person Under Investigation [PUI])	CDC	8/22/2014	8/22/2014 8/29/14	
Interim Guidance for Environmental Infection Control in Hospitals for Ebola Virus	CDC	8/19/2014	CAHAN 8/22/2014 CD Brief 8/22/2013	
Key Points – Ebola Virus Disease, West Africa	CDC	8/27/2014	8/28/2014	
HAN 368: Ebola Response Update #4	CDC	8/28/2014	8/28/2014	
Guidance for Safe Handling of Human Remains of Ebola Patients in U.S. Hospitals and	CDC	8/25/2014	CD Brief 8/29/2014	

Manturania a			
Mortuaries			
Interim Lab Guidelines for			
Handling/Testing EVHF	ASM	8/21/2014	
Specimens			
Interim Guidance for Specimen			
Collection, Transport, Testing			
and Submission for Patients	CDC	8/26/2014	8/29/2014
with Suspected Infection with			
Ebola Virus Disease.			
Interim Guidance for 9-1-1			
public safety answering points			
(PSAPs) and emergency			
medical services (EMS)	CDC	8/26/2014	8/29/2014
systems for managing patients	ODC	0/20/2014	0/23/2014
with known or suspected Ebola			
in the United States			
Ebola Flyer for Medical Centers	DCDC	8/2014	8/29/2014
Factsheet: Interim Guidance			
for Specimen Collection,			
Transport, Testing and	CDC	8/21/2014	8/29/2014
Submission for Patients with		J	57-57-57
Suspected Infection with Ebola			
Virus Disease			
Interim Guidance for			
Monitoring and Movement of	CDC	8/22/2014	8/29/2014
Persons with Ebola Exposure			
CDC Infection Prevention and			
Control Recommendations for			
Hospitalized Patients with	CDC	0/40/0044	0/00/0044
Known or Suspected Ebola	CDC	8/19/2014	8/29/2014
Hemorrhagic Fever in U.S.			
Hospitals			
CDC Advice for Colleges and			
Universities and Students	CDC	8/29/2014	9/5/2014
about Ebola in West Africa	220	3,23,2011	0, 0, 20 1 1
CDC Healthcare provider			
preparedness checklist for	CDC	9/12/2014	9/12/2014
Ebola virus disease	ODO	3/ 12/2014	3/12/2014
CDC Healthcare facility	CDC	0/12/2014	0/42/2044
preparedness checklist for	CDC	9/12/2014	9/12/2014
Ebola virus disease			
CDC HAN 371: Evaluating			
Patients for Possible Ebola	CDC	10/2/2014	10/2/2014
Virus Disease:		3.2,20.	. 5, _, _ 5
Recommendations for			

Healthcare Personnel and		
Health Officials	ļ	

RESOURCE REQUESTS

None

FINANCIAL IMPACTS

None